Developing and Sustaining Child Abuse Prevention Programs in Tough Times

This series contains excerpts from an online toolkit developed by the National Clearinghouse on Child Abuse and Neglect Information in partnership with the Office on Child Abuse and Neglect, Children's Bureau, U.S. Department of Health and Human Services, and other national child abuse prevention organizations.

PREVENTION FACT SHEETS
IN THIS SERIES

Collaborating With Your Community
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For more information see the Prevention Initiative website:
http://nccanch.acf.hhs.gov/topics/prevention

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Evaluating Your Prevention Program

EVALUATION HAS BECOME A CRITICAL ELEMENT of child abuse prevention program sustainability, as funders and policy makers increasingly ask for evidence of the impact of the programs they fund. It is equally important for programs to conduct evaluation activities as part of their ongoing quality assurance efforts.

A growing body of research exists about the effectiveness of child abuse prevention programs. For example, in a review of recent research, the CDC Task Force on Community Preventive Services found evidence that home visiting programs may reduce the incidence of child maltreatment by as much as 40 percent. (More information on this report can be obtained on the CDC website at www.cdc.gov/mmwr/preview/mmwrhtml/rr5214a1.htm.)

In a recent evaluation of 43 respite and crisis care programs across the country, 82 percent of parents surveyed said crisis respite care helped them keep their children safe, and 36 percent said it was "moderately" or "extremely" likely that their children would have been placed in foster care if crisis respite had not been an option. (The evaluation is available at www.archrespite.org/OE Phase II Brief Field Test Report.pdf)

Some research also exists on the effectiveness of parenting education programs. However, most of these studies demonstrate short-term gains in parents' knowledge, skills, or abilities without documenting the longer-term impact of these gains in reducing actual incidents of child maltreatment.
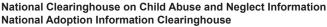
Similarly, evidence suggests programs designed to raise awareness about child sexual abuse may be successful in imparting knowledge, but there is little research to show this knowledge actually translates into fewer incidents of child sexual abuse.

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Prevention programs need to continue to move toward an outcomes-based approach to evaluation.

This kind of program evaluation provides program administrators, policy makers, and service providers with insight into whether programs work and for whom. Rather than relying upon anecdotal evidence or intuition, programs are able to link services with performance measures and outcomes. The results can be used to revise or refine specific approaches, policies, and practices to ensure better outcomes for children and families.

However, child abuse prevention programs can be particularly difficult to evaluate because they are successful, by definition, when something does not happen in the future. In other words, if a program to prevent child abuse and neglect is successful, incidents of abuse and neglect will not be observed in participating families. This is further complicated by the fact that it is not possible to assert that incidents of child abuse and neglect would have been observed in these families in the first place.

Because prevention programs create special challenges, evaluations of such programs demand thoughtful designs if the exercise is to be useful to program managers, policy makers, line staff, and the families they serve.

Examples

Family Connections

www.family.umaryland.edu

Family Connections is a community-based program at the University of Maryland in Baltimore targeting at-risk families with young children.

Thanks to its effective evaluation design, this program was the only one in the nation designated as "demonstrated effective" in the 2003 report, *Emerging Practices in the Prevention of Child Abuse and Neglect* (http://nccanch.acf.hhs.gov/topics/prevention/emerging/index.cfm)

Elements of the evaluation design that contributed to its success included random assignments to two intervention groups, data collection at multiple points, a significant sample size, and the use of 26 outcome measures.

Family Connections is now being replicated in eight communities with funding from the Children's Bureau, U.S. Department of Health and Human Services.

An Ounce of Prevention

www.wcpcan.wa.gov

This 2004 report from the Washington Council for Prevention of Child Abuse and Neglect discusses the Council's strategies for investment in effective programs.

Each program receiving Council funding must address and achieve positive outcomes in at least one of eight protective factor goal areas:

- Nurturing and bonding
- Responsive social network
- Knowledge of child development
- Effective problem solving
- Effective communication
- Non-punitive discipline and guidance
- Life management skills
- Stress management

To achieve these goals, programs receive technical assistance to develop expertise in measuring outcomes.

The Continuum of Evaluation Approaches

There are multiple ways to gather information about the overall impact of programs.

A program just beginning to consider evaluation might start with a basic program self-assessment to see whether they are in fact adhering to their overall goals and mission. Programs may also consider using some form of peer review process where they visit with other similar programs and help each other identify strengths, weaknesses, and areas for improvement. Finally, programs can build in ways to look at their outcomes using more traditional evaluation designs and processes.

Ideally, prevention programs should use a wide range of evaluation approaches, which include qualitative and quantitative research methods, and work actively to engage parents and families in the entire process.

Although many community-based prevention programs do not have the capacity or adequate funding to evaluate their programs using rigorous research methodologies, there are still numerous ways that prevention programs can assess and evaluate their impact. More and more emphasis is being placed on strength-based and participatory evaluation approaches for prevention programs. These approaches tend to utilize qualitative research methods such as focus groups and interviews to gather information about a program's impact.

An evaluation based on these types of approaches should be:

• Participatory in its process, involving multiple stakeholders, including program participants, staff, and other key decision-makers.
• Focused on promotional indicators, which highlight positive development, growth, and capacities within children and families.
• Based on adherence to family support principles, with the idea that the ways in which staff members interact with participants and the ways in which participants actively engage in the program and with each other affect family outcomes.

For information on a range of strength-based evaluation approaches for family support programs, visit Family Support America at www.familysupportamerica.org.

Examples

Building a Nation of Strong Families: Family Support and Prevention

www.familysupportamerica.org/downloads/FinalNJDoc11-14-03.pdf

This document is the result of research by the New Jersey Task Force on Child Abuse and Neglect regarding standards for effective programs to prevent child maltreatment. The Task Force reviewed literature on effective prevention programs from multiple fields including child welfare, public health, juvenile justice, substance abuse, and mental health.

In order to provide a broad overview of standards rather than a critique of model programs, the group organized the information under three headings: conceptual standards, practice standards, and administrative standards. This approach was used to provide the reader of this report with information that could be used to evaluate a variety of programs serving diverse populations.

Steps in Evaluating Prevention Programs

A successful evaluation begins with good planning and preparation. There is much to be done before the first data are collected, beginning with careful thought to what it is you want to know about the program and what you intend to do with the information once you gather it.

Here are the key steps in evaluating a child abuse prevention program.

Step 1: Prepare for the evaluation.

Involve staff, service providers, and program participants in the design process. Engage them in discovering the important questions to be addressed. Ask staff what obstacles they foresee to evaluating the program and how they think the results should be used. Identify who else is going to use the evaluation, and understand what each group of users expects to learn from the process.

You may also wish to conduct a review of the literature. Learn from other evaluations that have been done, not only in terms of what other evaluations have found, but also how such evaluations were conducted, including design framework, instruments, and data collection procedures.

Many of the resources listed in this fact sheet and in the companion online toolkit (http://nccanch.acf.hhs.gov/topics/prevention) may assist you in this process.

Step 2: Develop a program logic model.

A logic model of your program illustrates the relationship between program inputs (resources, staff, curriculum), outputs (services you are providing), and the specific outcomes and impact on participating families you expect as a result of your program.

A logic model includes several levels of expected outcomes. Immediate outcomes include changes in knowledge, skills, and attitudes (increased knowledge of positive discipline techniques, for example).

Intermediate outcomes reflect changes in applied skills and behavior (for example, increased use of positive discipline skills). Long-term outcomes (or impact) are what you hope the program will ultimately achieve (i.e., a decrease in the incidence of child abuse and neglect).

The Innovation Network's Web-based Workstation (www.innonet.org/tools.cfm) walks users through the development of a logic model.

Step 3: Develop an evaluation plan.

Use the logic model to identify expected outcomes and the strategies you will use to achieve them. From these, you will identify measurable indicators of success.

For example, prevention programs might measure decreases in parenting stress or increases in parenting knowledge about child development, maternal social support, family functioning, marital satisfaction, child health status, or home safety among participants.

A list of common risk and protective factors for child maltreatment, which may serve as useful measures, can be found on the Prevention Initiative Web site (http://nccanch.acf.hhs.gov/topics/prevention/emerging/riskprotectivefactors.cfm).

You will also need to select an appropriate research design. There are three basic types of evaluation designs that are typically used in outcome evaluation.

- *Experimental.* Families are randomly assigned to experimental and control groups, with program services provided only to families in the experimental group. Experimental designs are the strongest framework for establishing causal relationships and have the highest credibility. These designs tend to be more costly and time-consuming.
- *Quasi-experimental.* These designs may use either multiple groups for comparison or multiple data collection points over time, but do not assign families to groups randomly.

• *Nonexperimental*. Nonexperimental designs (which do not use multiple groups for comparison or collect data over time) cannot establish a direct connection between program services and family outcomes, but can provide valuable information about processes.

Your research questions, as well as the time and resources available, will be the major considerations driving your design selection.

Step 4: Collect data.

There are a number of data collection methods available to support program evaluation. These include:

• Surveys and questionnaires
• Interviews
• Standardized tests and assessments
• Observations
• Focus groups
• Case studies
• Program records
• Existing data

Step 5: Analyze data and report results.

The results of the evaluation should be reported to stakeholders, while the knowledge gained trhough this process should be used to improve prevention services.

In moving toward an outcomes-based approach, prevention programs may wish to refer to the examples and resources throughout this fact sheet and online at http://nccanch.acf.hhs.gov/topics/ prevention.

Resources

Evaluating and Reporting Outcomes: A Guide for Respite and Crisis Care Program Managers

www.archrespite.org/outcomes.htm

This guide contains several helpful evaluation tools for respite and crisis care programs, including published scales that can be purchased, scales that can be photocopied, and instructions for creating customized scales.

Measurement Issues in Child Maltreatment and Family Violence Prevention Programs

www.sagepub.com/journal.aspx?pid=39&sc=1

From the January 2002 issue of *Trauma, Violence, & Abuse,* this article offers guidelines for selecting appropriate domains for evaluation and provides specific information on a sampling of common instruments measuring family and child well-being, parenting, stress and coping, and family violence.

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Gateways to Information: Protecting Children and Strengthening Families